Guidance document: 90-51

CASES THE BOARD OF NURSING MAY CONSIDER FOR POSSIBLE CONFIDENTIAL CONSENT AGREEMENTS

- 1. Single medication error with no patient harm
- 2. Unintentional falsification of employment application
- 3. Unintentional falsification of initial licensure and/or reinstatement application (regarding past action, criminal convictions), where applicant misunderstood question and believed the Board already knew
- 4. Standard of care violation "with little or no injury"
- 5. Standard of care violation that may be in part due to systems issues
- 6. Technical probation violations (ie, late reports, etc)
- 7. Pre-employment positive drug screen without evidence it has affected practice
- 8. Possible impairment without evidence that it has affected practice (i.e., coming to work with alcohol on breath & sent home; hospitalized for psychiatric or substance abuse treatment)
- 9. CE violations for CMTs and LNPs
- 10. A single misdemeanor conviction involving moral turpitude, with no other issues (ex. Worthless check; shoplifting)
- 11. Single incident of exceeding scope of practice accepting assignment or agreeing to do a task without adequate training obtained or competency maintained and no patient harm
- 12. Inappropriate verbal response that does not rise to the level of verbal abuse (ie, "shut up")
- 13. Single boundary violation with no patient harm (ie, getting involved with patient finances) and not resulting in criminal conviction
- 14. HPIP participant not eligible for a stay, but with minimal practice issues
- 15. Vague "rough handling" where there is no patient harm & does not rise to the level of abuse
- 16. Unintentional/inadvertent Practice Agreement violations for LNP's with Prescriptive Authority

Adopted: May 14, 2003